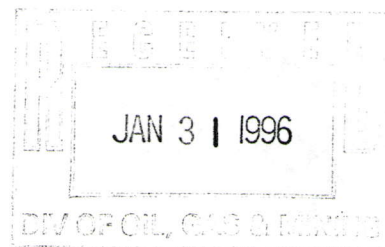


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UTAH BUILDING STONE SUPPLY
842 West 400 North
West Bountiful, Utah 84087
801-295-0601

STATE OF UTAH
Department of Natural Resources
Division of Oil, Gas, and Mining
3 Triad Center, Suite 350
Salt Lake City, Utah 84180-1203



Dear Sirs,

Accompanying are annual production reports for Dove Creek, Fisher Creek, Grouse Creek Mountain, Green Beetle, Lynn Spring, and Park Valley II stone removal and mining/quarry areas, along with the Enterprise Mill-site.

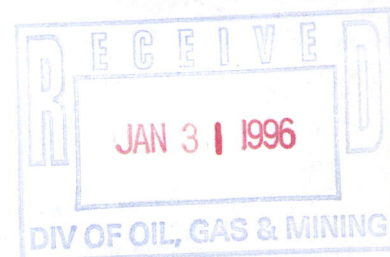
It is stipulated in the standard form for production reporting that a surface facilities map accompany the report of any area where there has been significant changes since the previous map was submitted. We would like to request that in those cases where the division determines an updated surface facilities map is required, that it refer to such SFM as submitted with current approved or proposed Plan of Operation for said area(s) when and if available. If such map is not available through a reference to the applicable P.O.O. within the Division, we would gladly furnish same.

Thank you for your consideration in this matter.

Sincerely,

Bill Bown
Bill Bown

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING
355 West North Temple
3 Triad Center, Suite 350
Salt Lake City, Utah 84180-1203
Telephone: (801) 538-5340
Fax: (801) 359-3940



ANNUAL REPORT OF MINING OPERATIONS

The informational requirements of this form are based on provisions of the Mined Land Reclamation Act, Title 40-8, Utah Code Annotated 1953, as amended, and the General Rules as promulgated under the Utah Minerals Regulatory Program. An operator conducting mining operations under a Notice of Intention must file an annual operations and progress report (FORM MR-AR) with the Division.

I. General Information

1. Report Time Period: From (mo./yr.) 1/95 To (mo./yr.) 1/96
2. DOGM File Number (Mine No): 5 1003/032
3. Mine Name: ENTERPRISE MILLSITE
4. Mineral(s) Mined (or permitted to mine): N/A
5. Type of mine N/A ☐ Surface Mine or ☐ Underground Mine
6. Legal Description (Location of Lands Affected):
NE 1/4, NE 1/4, Section 31, Township 13N, Range 13W
1/4, 1/4, Section , Township , Range
1/4, 1/4, Section , Township , Range
7. Name of Operator or Company: WILLIAM L BOWN
8. Permanent Street Address: 842 WEST 400 NORTH
City, State, Zip: WEST BOUNTIFUL, UTAH 84087
Phone: 801-295-0601
9. Company Representative (or designated operator):
Name: WILLIAM L BOWN
Title: OWNER
Business Address: 842 WEST 400 NORTH
City, State, Zip: WEST BOUNTIFUL, UTAH 84087
Phone: 801-295-0601

☐ Please check if any of the above information has changed since previous year.

II. Mining and Reclamation

MILLSITE

1. Was the ~~mine~~ active during the past year? Yes ☒ No ☐
2. If active, how much ore or mineral was ~~mined~~? 1,300 TONS
STORED

3. How much additional acreage was disturbed during the past year? NONE
4. Briefly describe any new or additional surface disturbances that occurred during the past year. This description should include the type of work performed, and volume of material moved.

MILLSITE SURFACE AREA REMAINED AT 2 ACRES.

5. How much acreage was reclaimed during the past year? NONE
6. Briefly describe the reclamation work performed during the past year. This description should include methods employed, and an evaluation of the results.

NONE

7. What is the total disturbed acreage at years end? 2 (TWO)

8. Briefly summarize any mining and/or reclamation plans for the upcoming year.

WE PLAN TO EXPAND MILLSITE TO THE FULL FIVE ACRES AS DISCRIBED. THIS EXPANSION WILL CONSIST OF GRADING AND LEVELING 3 ACRES. GRADING WILL BE NORTH TO SOUTH WITH SOIL ROW ON SOUTH END OF SITE.

NOTE: Section III., "Additional Information" applies only to large mining operations.

III. Additional Information

1. An updated surface facilities map should be attached if there have been significant changes since the previous map was submitted.
2. Any monitoring results or other reports that are required under the terms of the approved notice of intention should also be attached.

IV. Signature Requirement

I hereby certify that the foregoing is true and correct.

Name (Typed or Print):

WILLIAM L BOWN

Title of Operator:

OWNER

Signature of Operator:

William L Bown

Date:

1-29-96